

HARDSHIP PAYMENT PLAN AGREEMENT

Date.			
ACCOUNT	NUMBER:		
CUSTOMER	R NAME:		
SERVICE			
ADDRESS:			
PHONE:			
EMAIL:			
Improveme an outstan my curren	ent District #3 (District) and ding bill will be paid in installment:	nent is entered into between the Nueces Countya customer of the standard portion of the outstanding bill in instanding bi	ne District in which sconnected if I pay
Nueces Co service cha of this agre the District associated service tervill not be I agree to p	unty Water Control and Improver irges and fees accrued by me at the ement, my account will be subject t's policies on suspension and ter with nonpayment of accounts the mination, etc.). I further understand reinstated until the full amount sho	nowledge that I now owe the total amount of \$ ment District #3, which sum represents charges a service address above. I understand that if I fail to the returned payment policy, my water service mination and my account may be subject to a at will accrue during the term of this agreement own above has been paid together with all applice before the dates specified. In addition to the amount of the service will be subject to a service with all applications.	for water and/or to meet the terms e will be subject to ny additional fees at (delinquent fee, my water services able service fees.
Agreemen	t Terms:		
Customer	Name (PRINT)		
Customer	Signatura	 	
	CE USE ONLY	Date	
DATE APP	ROVED:	DATE AGREEMENT CLOSED:	